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Country programme recommendation**

Jamaica

Addendum

Summary

The present addendum to the country note submitted to the Executive Board at its first regular session of 2001 contains the final country programme recommendation for Board approval.

It contains a recommendation for funding the country programme of Jamaica which has an annual planning level of $1,000,000 or less. The Executive Director *recommends* that the Executive Board approve the amount of $3,020,000 from regular resources, subject to the availability of funds, and $6,980,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2002 to 2006.

* E/ICEF/2001/12.

** The original country note provided only indicative figures for estimated programme cooperation. The figures provided in the present addendum are final and take into account unspent balances of programme cooperation at the end of 2000. They will be contained in the summary of recommendations for regular resources and other resources programmes for 2001 (E/ICEF/2001/P/L.73).

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Basic data[a] *(1999 unless otherwise stated)*	
Child population (millions, under 18 years)	1.0
U5MR (per 1,000 live births) (2000)	20
IMR (per 1,000 live births) (2000)	17
Underweight (% moderate and severe)	4
Maternal mortality ratio (per 100,000 live births) (1987)	120
Literacy (% male/female) (2000)	83/91
Primary school enrolment (% net, male/female)	92/94
Primary school children reaching grade 5 (%) (1990)	96
Use of improved drinking water sources (%) (2000)	92
Routine EPI vaccines financed by Government (%)	100
GNP per capita (US$)	2 430
One-year-olds fully immunized against:	
Tuberculosis	88 per cent
Diphtheria/pertussis/tetanus	81 per cent
Measles	96 per cent
Poliomyelitis	84 per cent
Pregnant women immunized against tetanus	.. per cent

[a] Excerpted from the publication "Progress since the World Summit for Children: A statistical review", prepared as a supplement to the Secretary-General's report "We the children: End-decade review of the follow-up to the World Summit for Children" (A/S-27/3), and therefore may differ from data contained in the text of this document.

The situation of children and women

1. The analysis of the situation of children and women in Jamaica remains essentially the same as described in the country note submitted to the Executive Board at its first regular session of 2001 (E/ICEF/2001/P/L.29). Recent studies, surveys and progress reports on children confirm that the strategic interventions outlined in the new country programme of cooperation are consistent with the main issues affecting the realization of children's rights in Jamaica: economic stagnation: poverty; uneven quality of social services; violence; and the HIV/AIDS epidemic.

2. The Ministry of Health estimates that the cumulative number of reported AIDS cases increased by 10 per cent between June and December 2000. Adolescents between the ages of 10 to 19 years account for the greatest incidence of new cases among all age groups. This vulnerability of adolescents to the HIV/AIDS epidemic, combined with other factors including growing concern about the involvement of adolescent boys in crime and violence, poor educational performance and increased drop-out rates, confirms the need for concerted attention to this age group. The involvement of children and adolescents in criminal offences increased from 648 cases in 1994 to 844 cases in 1998. Between 1996 and 1998, the total number of suicides doubled, with adolescents and youth accounting for 31 per cent. Recent studies show that many adolescents — particularly boys — experience symptoms of depression and entertain suicidal thoughts. Recent focus group discussions with adolescents from different geographic areas and socio-economic backgrounds reveal

that they are keen to exercise their right to participation and to have the opportunity to influence policy debates and the development of messages, especially on HIV/AIDS and violence.

Programme cooperation, 1997-2001

3. The 1997-2001 country programme of cooperation E/ICEF/1996/P/L.24/Add.1) supported the national goal of poverty eradication by advocating for the development and reform of child-centred national policies within four programme areas. The 1999 mid-term review (MTR) noted that the majority of achievements resulted from support to qualitative, long-term processes of policy development and reform. The MTR recommended that this approach be continued, and that the culture of monitoring and evaluation, advocacy and social mobilization for improved measurement and societal acceptance of children's rights be strengthened.

4. The focus on collection, analysis and dissemination of child-centred data within the programme on social policy and planning helped to inform important and high-level policy debates on children, resulting in the incorporation of the rights of children and the obligations of duty bearers in the National Policy for Children, the National Poverty Eradication Plan and other policies. Other studies and tools developed as part of the programme, including studies on budgetary resources for children, the establishment of the social indicator monitoring system, the multiple indicator cluster survey undertaken as part of the national end-decade assessment and surveys to measure the prevalence of street and working children, have been important tools for data collection and programme development by the Government and non-governmental organizations (NGOs). Dynamic advocacy and social mobilization around the Global Movement for Children and the "Say Yes for Children" campaign helped to increase the number and quality of alliances and partnerships with the Government and civil society and to the greater recognition by policy makers and programme planners of the centrality of children's rights.

5. The basic education and early childhood development (ECD) programme was instrumental in the reform of sectoral policies, including support to the National Task Force leading to the Government's adoption of a policy to integrate early childhood services at the Ministries of Health and of Education and Culture, and to the establishment of an Integrated Early Childhood Unit. The latter is an intersectoral coordination mechanism responsible for monitoring the policy, planning and regulatory functions of the National Plan of Action for Early Childhood Development. UNICEF also supported the strategic review of the National Early Childhood Programme, the development of occupational standards for day-care providers, and the development of operational and management policies and standards for early childhood institutions. Assistance to home-visiting programmes resulted in greatly expanded coverage of services, due in large part to the work of the Rural Family Support Organization, recipient of the UNICEF Maurice Pate Award in 2000. UNICEF supported the formation of the Coalition for Better Parenting, which was instrumental in coordinating and delivering integrated support services for low-income families and communities through its network of member agencies.

6. The programme for children and youth at risk supported the preparation of the draft Child Care and Protection Act, which aims by the end of 2001 to incorporate under one legal instrument the major social and legal provisions for the enhanced

care and protection of children. Although the draft act is strongly oriented towards children at risk, it is a stepping stone towards more holistic legislation encompassing the full spectrum of children's rights. The programme supported consultations on the restructuring of the Children's Services Division of the Ministry of Health into a proposed executive child development agency with more focused functions of policy development and setting of standards. UNICEF assisted the Government and NGOs to deliver remedial education, life skills training and outreach services for approximately 450 street and working children. Attention to HIV/AIDS included, for the first time in Jamaica, support for the production of a manual outlining recommended practices and approaches for working with HIV/AIDS-affected children that was used in the training of 40 residential and community caregivers.

7. The decentralized community development for children programme supported the Ministry of Health in a pilot initiative to prevent mother-to-child-transmission (MTCT) of HIV by providing resources for supplies, training and evaluation benefiting some 180 health workers in 20 health institutions. Although still at an early stage and covering only 20 per cent of deliveries, the pilot initiative is paving the way for institutionalized MTCT services across the island. The programme also supported training of key personnel, provision of supplies and development of advocacy for the management of communicable and vaccine-preventable childhood illnesses, breastfeeding, nutrition and hygiene education. Although immunization rates declined in 1998, the continued reinforcement by the Ministry, UNICEF and the Pan American Health Organization helped to reverse the trend slightly in 2000. UNICEF support facilitated the assessment and certification of six hospitals as "baby-friendly". Based on the MTR recommendation to restructure this programme, its focus was shifted towards addressing adolescent development and participation, including support for peer-to-peer facilitation and mentoring programmes to impart information to adolescents on HIV/AIDS prevention.

Lessons learned from past cooperation

8. The lessons learned remain essentially the same as described in the country note. A lesson requiring special attention is that social policy development, legislative reform, awareness-building and changing the behavioural patterns of rights holders and duty bearers are complex processes that often have outcomes that are slower than expected. The country programme needs to ensure that objectives are realistic and achievable, and promote dynamic advocacy, mobilization, support by leaders and partnership-building at all levels so that all rights holders and duty bearers are aware of progress and developments and participate accordingly. Similarly, adaptable and flexible strategies and coordination mechanisms are required to respond to the cross-cutting issues addressed by the country programme.

Recommended programme cooperation, 2002-2006

	Estimated annual expenditure (In thousands of United States dollars)					
	2002	*2003*	*2004*	*2005*	*2006*	*Total*
Regular resources						
Early childhood development	114	113	112	111	110	560
Adolescent development and participation	112	111	110	109	107	549
Policy, advocacy and special care and protection	205	204	203	202	200	1 014
Cross-sectoral costs	173	176	179	182	187	897
Subtotal	**604**	**604**	**604**	**604**	**604**	**3 020**
Other resources						
Early childhood development	800	800	514	513	513	3 140
Adolescent development and participation	540	540	350	350	350	2 130
Policy, advocacy and special care and protection	300	300	300	300	300	1 500
Cross-sectoral costs	42	42	42	42	42	210
Subtotal	**1 682**	**1 682**	**1 206**	**1 205**	**1 205**	**6 980**
Total	**2 286**	**2 286**	**1 810**	**1 809**	**1 809**	**10 000**

Country programme preparation process

9. The Planning Institute of Jamaica (PIOJ) and UNICEF led a participatory process that involved more than 200 partners, including social sector ministries, civil society organizations, academia, United Nations agencies, and bilateral and multilateral agencies. Thematic working groups established in 2000 to inform the situation analysis and strategy development phases were reconstituted in 2001 to assist in the formulation of the country programme. The life cycle and rights-based approaches were used throughout the process. Multi-thematic focus group discussions and workshops with adolescents generated critical inputs. Synergies were established with the Common Country Assessment (CCA) and the end-decade assessment by using common indicators and findings. The process also took into account the Kingston Consensus on Children and Social Policy in the Americas. The country programme process complemented and informed the United Nations Development Assistance Framework (UNDAF), which is scheduled to be completed by end-2001. Environmental impact screenings concluded that all of the proposed projects are "environment-friendly". A vulnerability assessment helped to identify relevant operational responses to natural disasters.

Country programme goals and objectives

10. The overall goal of the country programme is to strengthen national, community and family capacities to promote, protect and fulfil the rights of all children and to ensure their opportunities to meet and sustain their full potential. To achieve this goal, the country programme will support three interrelated objectives: (a) to help ensure that all children up to the age of eight years, particularly vulnerable groups, have access to quality prenatal and early childhood services and develop to their full potential by meeting their survival, growth and developmental needs and rights in safe and caring environments; (b) to foster and enhance caring, supportive and participatory environments for the development of well-adjusted, healthy, responsible and empowered adolescents (9-18 years) who are capable of contributing to their own and national development; and (c) to strengthen national and subnational capacities for protecting and promoting child rights through social policy, advocacy and focused interventions for children in need of special care and protection.

11. The overall programme structure remains essentially the same as described in the country note. However, the programmes for advocacy, policy and planning and for special care and protection were merged because of the complementarity of their interventions. This resulted in a more focused and manageable programme structure which will facilitate the achievement of sustained results and outcomes for children.

Relation to national and international priorities

12. The programme is consistent with the Government's goal of poverty reduction and its acceptance of early childhood, children in poverty and adolescents at risk as national priorities. UNICEF will continue working with the National Poverty Eradication Programme to ensure that children are at the centre of all poverty reduction initiatives. Support to new policies will be guided by the framework of the National Policy for Children, the recommendations of the national end-decade assessment and the National Plan of Action for Early Childhood Development. The programme will also advocate for continued inclusion of the rights-based and life cycle approaches in the ongoing revision of social safety nets and the social policy framework evaluation, both of which are implemented by the Office of the Prime Minister. Continued support will be provided to the Office of the Special Envoy for Children and its leadership for the child rights movement in Jamaica.

13. The priorities of the country programme are also consistent with Jamaica's State Party reports to the Committee on the Rights of the Child. The Committee's 1995 review of the first report, submitted in 1993, recommended incorporation of the principles of the Convention on the Rights of the Child into national legislation; the development of an integrated system for monitoring the implementation of the Convention; the allocation of sufficient resources for children's programmes; increased initiatives to register all children; and additional steps to combat abuse and exploitation of children. The Government's second report, in 1998, addressed these recommendations.

14. The country programme's strategies and priorities support those identified in the CCA related to the promotion of social capital formation, equity, civil order and basic human rights. The country programme will support integration of the recommendations of the United Nations Millennium Summit Declaration into the national policy framework, with special attention to human rights, protection of

children as the most vulnerable, poverty eradication and HIV/AIDS. The programme's focus on preventing the sexual abuse and exploitation of children is in line with Government's recent signing of the Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography. The country programme also takes into account the organizational priorities identified in the future global agenda for children. During annual reviews, the country programme's strategy and objectives will be reviewed and, when appropriate, revised against the UNICEF medium-term strategic plan and the outcome document of the United Nations Special Session on Children.

Programme strategy

15. The programme strategy remains unaltered since the country note. The programme deploys a multi-layered combination of guiding principles, strategies and cross-cutting concerns that encompass the foundational principles of the Convention on the Rights of the Child and such other relevant human rights principles as accountability, universality and the indivisibility and interdependence of rights. The guiding principles provide the sense of direction and justification for the combined efforts of all implementing and collaborating partners. The strategies define how the overall goal of the country programme will be achieved, paying special attention to the supporting and cross-cutting criteria aimed at obtaining maximum return on human and financial investments in child-centred programming.

16. Working through the United Nations theme group on HIV/AIDS and within the framework of the regional multi-country initiative on HIV/AIDS (E/ICEF/2001/P/L.62), UNICEF will support activities that strengthen institutional capacities as well as advocacy, information and communication to prevent the transmission of HIV/AIDS among adolescents; enhance the capacities of families and communities to care for children affected by the epidemic; and build enabling programme and policy environments. Additional cross-cutting concerns include an integrated approach to parenting; mainstreaming gender issues; data, research, monitoring and evaluation; and advocacy, mobilization and participation. The country programme is structured around three programmes.

17. **Early childhood development**. The programme will address the problems of suboptimal development of young children; limited access to early childhood programmes, especially for children up to three years of age; problems of transition and low learning achievement, particularly for boys between the aged 6-8 years; inadequate parenting practices and limited support mechanisms for parents; maternal and child mortality; MTCT of HIV; and fragmented coordination mechanisms in the early childhood sector. The programme consists of three project areas: (a) an enabling policy and programming environment; (b) improving the quality and standards of service delivery; and (c) strengthening family and community capacities. Expected key results include an improved and more protective environment for the care and development of young children; an increase in coverage by early childhood institutions; strengthened capacities of parents to stimulate, care for and protect their children; reduced rates of MTCT of HIV; and an increase in the quality and impact of policies for the holistic development of young children.

18. The first project will help to foster a policy, planning and legislative environment that mainstreams issues concerning young children, coordinates and facilitates actions and mobilizes resources for ECD. It will support the development

and enactment of comprehensive and child-centred legislation, policies and standards to guide and strengthen service provision and financial investments, as well as to increase the awareness and participation of policy makers and civil society to advocate for the holistic development of the young child. A multisectoral approach to early childhood will be promoted to strengthen collaboration and communication between the Government and its principal partners. Tools for integrated research, monitoring and evaluation will be developed within broader data systems for regular assessment of changes in the situation of young children and their environments.

19. The second project will help to improve access to and the quality of early childhood services to promote child-centred learning, healthy behaviour and life skills; and to enhance the school performance of the young child. Actions will include standardization, coordination and expansion of training mechanisms for early childhood workers in order to improve care, stimulation and educational skills. Priority survival issues will be addressed through support for strengthening the quality of antenatal care, management of high-risk pregnancies and pilot MTCT programmes. The skills of community health workers will be improved to implement the protocol for the Integrated Management of Childhood Illness. UNICEF will collaborate with national partners to monitor proactively and draw attention to immunization and child mortality trends. Early childhood resource centres throughout the island will be improved through refurbishment and provision of supplies and training so as to provide integrated services to early childhood institutions and families. Adequate integration to achieve mutual support between health care and early childhood workers and institutions will be promoted.

20. The third project will aim to enhance the role of parents and communities in the care and development of young children through the establishment and coordination of interventions in parenting education and support mechanisms. Support will be provided to government and NGO partners to improve knowledge, attitudes and practices of parents and other duty bearers to provide caring and supportive and protective environments for young children, including those who are at risk and vulnerable. Capacity-building, advocacy and social mobilization will be promoted to ensure that families and communities are well informed, empowered and capable of providing better care and protection for their children. Mainstreaming of early childhood initiatives in wider community development efforts will be promoted and supported.

21. Regular resources will be used to promote the development of policies and legislation and to support the multisectoral approach, institutional strengthening, the development of curricula and capacity-building of home-visiting and early childhood institutions. Other resources will fund advocacy and participation efforts, operational research and going to scale with initiatives funded by regular resources.

22. **Adolescent development and participation**. The programme will address the issues of insufficient and inadequate holistic services outside of reproductive health; inadequate access to information and support mechanisms to develop life skills; the prevalence of high-risk behaviours, including violence, aggression, depression, drug and alcohol abuse, and suicide; the high impact of the HIV/AIDS epidemic on this age group; limited spaces and opportunities for effective participation; and weak coordination and policy mechanisms. The programme consists of three projects: (a) enabling policy and programming environment; (b) strengthening family, community and institutional capacities; and (c) enhancing adolescent participation. Expected key results include an improvement in the quality of information and

resources for adolescents; a reduction in high-risk behaviours replaced by positive life and coping skills; a reduction in the prevalence of HIV/AIDS among adolescents; and an improved policy and coordination framework wherein participation of adolescents is central.

23. The first project will support the development of policy and planning environments that effectively address adolescent development and participation through the design and implementation of rights-based and "adolescent-friendly" legislation to regulate and improve access to services. Coordination efforts will be strengthened to bring together Government, NGOs and civil society, donor agencies and the private sector around issues affecting adolescents. The project will also advocate for increased commitments at all levels to initiatives that support adolescent development and participation, with a particular focus on the acquisition of life skills and enhanced access to information on HIV prevention. The project also supports increased access to quality education, including reintegration of at-risk adolescents into the formal school system. Tools for integrated research, monitoring and evaluation will be developed to support innovations in the sector and to assess changes in the status of adolescents and their environments.

24. The second project will enhance the capacities of families, communities, and institutions to provide caring and supportive environments for adolescents. Relevant institutions will be strengthened to deliver "adolescent-friendly" services that include increasing access to information on HIV prevention, with a view to influencing positive behaviour, especially by adolescent boys. Preventive programming will be introduced by developing and implementing early detection and referral systems for adolescents at risk of dropping out of school, abuse and sexual exploitation, exposure to HIV, and engaging in crime and violence.

25. The third project will promote and support the development of spaces and capacities for meaningful participation by adolescents, mostly by enhancing their willingness and capacity to participate within national, community, institutional and family settings. The focus in this project will be on promoting participation both as a strategy for contributing to the achievement of other programme goals and as an end and outcome in its own right. In parallel, the capacities of families, communities, NGOs and institutions will be strengthened so they may understand, accept and promote adolescent participation.

26. Regular resources will be used to improve coordination mechanisms; promote priority research, evaluation and innovations in adolescent participation; and support institutional strengthening and capacity-building. Other resources will support advocacy, parenting training and support programmes; and expansion of spaces and opportunities for participation.

27. **Policy, advocacy and special care and protection**. The programme will address the fragmented social policy environment; the insufficient allocation of national resources for efficient social sector expenditure; uncoordinated use of existing standards and policies; the slow and gradual acceptance at all levels of the centrality of children's rights; and the growing proportion of children exposed to violence and commercial sexual exploitation, living with and affected by HIV/AIDS and in conflict with the law. The programme comprises three projects: (a) enabling policy and planning environment; (b) advocacy, communication and mobilization; and (c) priority special care and protection interventions. Expected key results include an increase in the efficiency and impact of child-centred expenditures; an improvement in the linkages between sectors in the development of broad and holistic policies and legislation for children; an increase in the number of advocacy

partners at all levels, especially in civil society and the private sector; a reduction in the incidence of abuse and exploitation of children; and an improved regulatory and policy framework for juvenile justice, contributing to a decline in the incidence of delinquency.

28. The first project will promote policy and legal reform to address and enforce the rights of all children by strengthening, accelerating and helping to sustain the pace of implementation of "child-friendly" policies and legal reform, with particular attention to the Child Care and Protection Act and juvenile justice reform. Support will be provided for the establishment and utilization of appropriate policy and institutional frameworks for children's rights, and to strengthen capacities for social policy development and analysis, research and evaluation. The issue of exclusion of children, including those disadvantaged by disabilities, will be addressed through policy development and other interventions. UNICEF will support the Government in the follow-up and implementation of commitments in international conventions, agreements and declarations, particularly the Convention on the Rights of the Child and the outcome document of the United Nations Special Session on Children.

29. The second project will advocate and mobilize for the fulfilment and protection of children's rights, particularly of young people affected by HIV/AIDS, by increasing awareness and responsibility of duty bearers. Strategic partnerships and alliances for children will be broadened for improved defence of their rights. The capacities of national institutions, civil society and partners to utilize communication and participatory methodologies will be strengthened to contribute to effective behavioural change in relation to HIV/AIDS. A resource centre will be developed for the acquisition and dissemination of information on children and their rights. External relations activities will be undertaken to generate greater knowledge of the development of the country programme on behalf of children's rights, thereby establishing a sound framework for resource mobilization.

30. The third project will help to guarantee the rights of children in need of special care and protection through strengthening legislation, policies and the capacity of caregivers and service providers. Support will be given to the development and implementation of standards, policies and legal frameworks for children requiring special care and protection. With a particular focus on orphans and vulnerable children affected by HIV/AIDS and by physical and sexual abuse, service delivery will be strengthened with focused and holistic interventions and expanded through institutional capacity-building. This will be undertaken in tandem with the strengthening of capacities of parents, caregivers, families and communities to care for these children. Operational research and evaluations will be supported to identify, document and develop best practices, standards and models of service delivery for these children.

31. Regular resources will support policy and legal development, awareness-raising, advocacy and social mobilization, and research. Other resources will be reserved for institutional reforms, training and capacity-building, and for supporting programmes for children in need of special care and protection.

32. **Cross-sectoral costs** will cover programme implementation costs that are not attributable to individual programmes but are clearly linked to their delivery. They will be used mainly to provide programme and operational support for the efficient and effective implementation and management of the country programme.

Monitoring and evaluation

33. An integrated monitoring and evaluation plan will address four pivotal areas: (a) mechanisms for project monitoring; (b) monitoring and analysis of child-centred social and economic data; (c) research and evaluation; and (d) capacity-building. Project monitoring mechanisms will help to keep track of key indicators for outcome and impact through field trips, monitoring of activities and evaluation reports. Representative indicators will include the coverage of quality early childhood care services; the development and use of "adolescent-friendly" programme protocols, standards, materials and other resources; implementation of the Child Care and Protection Act and other policies for children; and the reduction of MTCT and transmission of HIV among adolescents. Monitoring of child-centred social and economic data will be continued through updates to the situation assessment and analysis; management of indicator databases; and analysis, use and dissemination of data for policy development, especially in the area of budgetary allocations and expenditures for children. Research and evaluation will help to strengthen the identification of best practices and lessons learned and to highlight required programme adaptations for more efficient resource utilization. An average of one to two evaluations will be conducted annually, including on the measurement of knowledge acquired by service providers for effective implementation of children's programmes; innovative approaches to participation of young children and adolescents; perceptions of risk by adolescents; and the impact of pilot interventions in early childhood and the capacity to go to scale. The annual reviews and the MTR scheduled for 2004 will be used to present evaluation findings and to identify new themes. Training and capacity-building on monitoring and evaluation will be promoted for selected national partners.

Collaboration with partners

34. The country programme will collaborate with such critical government partners as the Ministries of Health, of Education and Culture, of Local Government, Youth and Community Development, of National Security and Justice and of Finance; PIOJ; the Office of the Prime Minister; the Statistical Institute of Jamaica; and the Bureau of Women's Affairs to influence the design and impact of policies and programmes to reflect the rights-based approach more consistently. This will entail joint consultations, operational research, sharing of best practices and lessons learned and participation in programme development.

35. Working with and through the United Nations system and other bilateral and multilateral agencies, UNICEF will use a collaborative approach to ensure that adequate attention is given to children's rights in the CCA and UNDAF, as well as in various thematic working groups. Interventions in the area of HIV/AIDS will complement the support provided by the Canadian International Development Agency (CIDA), the United States Agency for International Development (USAID) and the World Bank in order to achieve a strong level of synergy. The involvement and financing provided for the primary education sector by the Caribbean Development Bank, the Inter-American Development Bank (IDB) and the World Bank, the United Kingdom Department for International Development (DfID) and USAID have opened up opportunities for UNICEF to concentrate in the area of ECD. Other collaborating partners will include CIDA and the Bernard Van Leer Foundation. UNICEF will continue supporting efforts by the Ministry of Education and Culture, with support from DfID, to undertake a sector-wide approach.

36. The emerging focus on and support to adolescent development and participation, including HIV/AIDS prevention, will complement interventions on reproductive health being promoted by the United Nations Population Fund, USAID and other partners. In the area of special care and protection, UNICEF will complement the work currently undertaken by CIDA, DfID and IDB on social conflict, legal reform and strengthening the policy environment. UNICEF will continue working with and mobilizing NGOs and civil society to act in turn as mobilizers and advocates for the rights of children and women, as well as with implementing partners at community and family levels. The slowly evolving partnership with the private sector seeks to leverage its support for programmes using ECD and the prevention of HIV/AIDS and violence among adolescents are entry points.

Programme management

37. PIOJ and UNICEF will establish and co-chair a Country Programme Coordination Committee comprising the permanent secretaries of the key government ministries and the executive directors of governmental agencies and institutes, as well as selected NGOs. The Committee will meet periodically to facilitate coordination and linkages between the various collaborating partners from the Government, NGOs, civil society, donors and United Nations agencies; monitor the progress and performance of each programme plan of action; ensure appropriate application of programme strategies as well as achievement of objectives; and monitor the use and liquidation of cash assistance. PIOJ and UNICEF will jointly organize and conduct annual planning and review meetings, as well as a more comprehensive MTR in 2004. The Committee will ensure agreement on recommended annual and mid-course changes to the structure and orientation of the country programme. The Committee's work will be complemented by management and coordination mechanisms established for each individual programme.

TABLE

COUNTRY : JAMAICA
PROGRAMME : 2002-2006

LINKAGE OF PROGRAMME BUDGET AND STAFFING/STAFF COSTS

PROGRAMME SECTION/AREAS AND FUNDING SOURCE	PROGRAMME BUDGET			POSTS a/										STAFF COSTS b/		
	RR	OR	TOTAL	D2/L7	D1/L6	P/L5	P/L4	P/L3	P/L2	IP	NP	GS	TOTAL	IP	LOCAL	TOTAL
REGULAR RESOURCES :																
EARLY CHILDHOOD DEVELOPMENT	560,000		560,000	0	0	0	0	0	0	0	0	0	0	0	0	0
ADOLESCENT DEVELOPMENT AND 1/	549,000		549,000	0	0	0	0	0	0	0	0	0	0	0	0	0
POLICY, ADVOCACY AND SPECIAL 2/	1,014,000		1,014,000	0	0	0	1	0	0	1	0	0	1	690,317	0	690,317
CROSS-SECTORAL COSTS	897,000		897,000	0	0	0	0	0	0	0	1	4	5	0	830,992	830,992
TOTAL RR	3,020,000		3,020,000	0	0	0	1	0	0	1	1	4	6	690,317	830,992	1,521,309
OTHER RESOURCES :																
EARLY CHILDHOOD DEVELOPMENT		3,140,000	3,140,000	0	0	0	0	0	0	0	2	1	3	0	792,102	792,102
ADOLESCENT DEVELOPMENT AND 1/		2,130,000	2,130,000	0	0	0	0	0	0	0	1	1	2	0	529,292	529,292
POLICY, ADVOCACY AND SPECIAL 2/		1,500,000	1,500,000	0	0	0	0	0	0	0	0	0	0	0	0	0
CROSS-SECTORAL COSTS		210,000	210,000	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL OR		6,980,000	6,980,000	0	0	0	0	0	0	0	3	2	5	0	1,321,394	1,321,394
TOTAL RR & OR	3,020,000	6,980,000	10,000,000	0	0	0	1	0	0	1	4	6	11	690,317	2,152,386	2,842,703
SUPPORT BUDGET	Operating costs		640,471													
	Staffing			0	0	1	0	0	0	1	2	4	7	830,019	1,261,457	2,091,476
GRAND TOTAL (RR + OR + SB)				0	0	1	1	0	0	2	6	10	18	1,520,336	3,413,843	4,934,179
Number of posts and staff costs:																
Current programme cycle										2	5	8	15			
At the end of proposed programme cycle (indicative only)										2	6	10	18	1,520,336	3,413,843	4,934,179

RR = regular resources.
OR = other resources.
IP = international Professional.
NP = national Professional.
GS = General Service.
SB = support budget.

a/ Each post, regardless of its funding source, supports the country programme as a whole.
b/ Excludes temporary assistance and overtime.

1/ ADOLESCENT DEVELOPMENT AND PARTICIPATION
2/ POLICY, ADVOCACY AND SPECIAL CARE AND PROTECTION

E/ICEF/2001/P/L.29/Add.1